



Wonder Barn Nursery

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This policy is shared with all staff, parents and stakeholders. It is also published on via our communication app 'Family'

Role: Gemma Aziz and Rebecca Collins- Owners/Directors

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We promote children's health, safety, dignity and wellbeing through clear arrangements for medicines, illness, allergies, food, hygiene, nappy changing, sun safety and sleep. Staff follow current EYFS requirements and current public-health guidance.

6.1 Administering Medicines

- Medication is administered only where authorised and in accordance with the child's written instructions, the setting's medication procedure and the child's individual health needs.
- Medicines must be in date, clearly labelled, in original packaging and stored securely and accessibly as required.
- Parental consent and a clear record are obtained for routine administration.
- Emergency medicines held at the setting (e.g. Liquid paracetamol/antihistamine) are administered in accordance with the child's individual health plan and emergency arrangements; life-saving treatment is not delayed where immediate action is required.
- Each administration is recorded, including date/time, medicine, dose, person administering and relevant parent/carer notification.
- Children with ongoing medical needs have an individual health/medical plan developed with parents and, where appropriate, health professionals. Staff receive appropriate training before undertaking specialist care.

While we do not care for children who are unwell and should be at home, we will administer medication when necessary to support a child's health and wellbeing—provided it is done in line with our policy, safeguarding expectations, and legal requirements.

Procedures

General Medication

- Children must be well enough to attend before any medication is administered.
- Only medication that is:
 - o Prescribed by a qualified medical professional, and In-date, labelled, and in original packaging will be administered.
- The child's name, dosage, and instructions must be clearly marked on the label.
- Aspirin is never given unless prescribed by a doctor specifically for that child.

Parent Consent and Record Keeping

- Medication is only given where a parent/carer has completed a written medication consent form found on Family, including:
 - o Full name and date of birth of the child
 - o Name, strength, and dosage of medication
 - o Who prescribed it and reason for use and administration method and timing
 - o Storage instructions and expiry date
 - o Any known side effects
 - o Parent/carer consent and date
- Each dose is recorded in the Medication Record, including:
 - o Date and time
 - o Dose and method
 - o Name of staff administering staff and a witness
 - o Parent acknowledgement on collection

Storage and Handling

- Medicines are stored securely, either in a high-level cupboard or fridge as required, in clearly marked containers.
- Medication is returned at the end of the day or earlier if no longer required.
- Out-of-date medication is not used and returned to parents promptly.

Emergency Use of Non-Prescription Medicines

We retain a small supply of emergency non-prescription medicines such as:

- Paracetamol (e.g. children's liquid Calpol)
- Antihistamine (e.g. Piriton)

These are only administered:

- In the event of an unexpected medical emergency (e.g. high fever or allergic reaction)
- If prior written consent has been given by the parent/carer on the child's registration or health form
- If verbal authorisation is received from the parent/carer at the time of use (except in life-threatening emergencies requiring immediate action)

This is intended to:

- Prevent febrile convulsions
- Support the child's safety during the wait for collection or medical treatment

All emergency administration is logged in the Medication Record (on Famly) and must be acknowledged by the parent on collection.

Long-Term Medical Needs

- For children with ongoing medical conditions (e.g. asthma, epilepsy, diabetes), we complete an Individual Health Care Plan (IHCP) in consultation with parents and, where appropriate, medical professionals.
- The plan details:
 - o The condition and medication needed
 - o Signs and symptoms
 - o Emergency action to be taken
 - o Training requirements for staff
 - o Risk management, including outings
- IHCPs are reviewed every 6 months or sooner if the child's condition or medication changes.

Trips and Outings

To be taken:

- Medication needed during outings is carried by a designated staff member in a sealed, labelled
- All required forms and emergency plans accompany the child.
- Medication given during an outing is logged and attached to the setting's Medication Record for parent signature.

6.2 Managing Children Who Are Sick, Infectious, or with Allergies

We aim to care for healthy children by preventing the spread of infection and by effectively managing allergies and other medical needs. We follow current public health guidance to limit cross-infection and promote a safe, inclusive environment. (See attached guidance poster PHA England)

- We follow current UKHSA exclusion guidance rather than applying a blanket exclusion period to all illnesses or antibiotics.
- Parents are contacted when a child is unwell and children are supported safely and comfortably while awaiting collection.
- Vomiting and diarrhoea are managed in line with current UKHSA guidance; the setting follows the current recommended exclusion period.
- Known allergies are recorded before attendance and managed through an allergy risk assessment and, where appropriate, an allergy/health care plan.
- All relevant staff know children's allergies, dietary requirements, emergency medication and emergency procedures. Allergy information is shared securely and displayed only where necessary for safe practice.
- Notifiable diseases and outbreaks are managed with UKHSA/local public-health advice and Ofsted is notified where the EYFS requires it.

6.3 Recording and Reporting of Accidents and Incidents

We are committed to maintaining a safe and secure environment. We follow the procedures set out in the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR 2013) to report and respond to all accidents and incidents appropriately.

- Accidents and incidents involving children are recorded promptly, including the action taken and any first aid provided. Parents are informed as appropriate.
- Records are reviewed to identify patterns, recurring hazards and improvements to practice.
- Ofsted is notified of the serious accidents, injuries, illnesses, deaths and other notifiable events specified by the EYFS, within the required timescale.
- RIDDOR reporting is completed to the HSE where the statutory criteria are met. Safeguarding concerns are managed under the Child Protection and Safeguarding Policy.

6.4 Nappy Changing Policy

We are an inclusive setting and welcome all children, including those who are not yet toilet trained. No child is ever excluded due to their stage of toileting development. We support children and families with toilet training in a way that is sensitive, respectful, and based on each child's readiness and individual needs.

We provide appropriate nappy changing facilities and follow strict hygiene routines to ensure children's safety, comfort, and dignity. We view toilet learning as a self-care skill that is supported in a positive, non-judgemental and developmentally appropriate way.

Nappy changing is used as an opportunity for high quality and positive interactions between adults and children.

- Children are changed when needed, with privacy, dignity and bodily autonomy respected.
- Changing is carried out hygienically and children are never left unattended on a changing surface.
- Staff know individual toileting routines and support toilet learning positively and without shame or pressure.
- Personal care arrangements are appropriate to the child's age, developmental needs, health needs and any agreed care plan.

6.5 Food and Drink Policy

We recognise that mealtimes support children's health, wellbeing, independence, social development and relationships.

We provide healthy, balanced and nutritious food and drinks and ensure children's individual dietary, allergy, cultural, religious and developmental needs are understood and met.

Fresh drinking water is available and accessible throughout the day.

Procedures

Dietary Needs and Allergies

Before a child starts, we obtain information about dietary requirements and preferences, food allergies and intolerances, religious or cultural requirements, special health or medical needs, and the child's stage of weaning and familiar food textures where applicable.

This information is recorded, kept up to date and shared with all staff involved in preparing, handling or serving food.

At every mealtime and snack time, a named member of staff checks that food is suitable for each child.

See also Managing Children with Allergies Policy.

Food Provision and Storage

All food is stored, prepared and served safely and hygienically.

Food provided is healthy, balanced and nutritious; appropriate for children's age, stage and developmental needs; prepared safely to reduce choking risks; suitable for individual dietary and allergy requirements; and varied and culturally inclusive.

Fresh drinking water is available and accessible throughout the day.

Provided Lunches

Lunches provided by the setting are purchased ready-made from The Nursery Catering Company.

Meals are delivered frozen and stored according to the supplier's instructions. Freezer temperatures are checked and recorded daily.

Meals are cooked according to supplier instructions and food temperatures are checked and recorded before serving.

A member of staff with a valid full-course paediatric first aid certificate is present in the room whenever children are eating.

Packed Lunch Guidance for Parents

Parents/carers are given clear guidance about healthy food choices, allergies and safe storage.

Parents are encouraged to provide a balanced and nutritious lunch, fresh fruit and vegetables, suitable drinks (preferably water), and food appropriate to the child's developmental stage.

Parents are asked to avoid foods high in sugar, salt and saturated fat and foods that present a choking risk.

Children must not share food because of allergy and dietary risks.

Where a packed lunch presents a significant health or safety concern, we will discuss this with parents/carers and agree an appropriate solution.

Healthy Eating Culture and Supervision

Mealtimes support positive social interaction, conversation, communication, independence, healthy choices, hygiene and enjoyment of a range of foods.

Staff sit with children and provide close supervision.

Children are never forced to eat. Staff encourage children positively and sensitively to explore and try foods.

Drinks and Milk

Fresh drinking water is available and accessible throughout the day.

Milk is provided in accordance with current EYFS requirements and relevant nutrition guidance.

Staff ensure drinks are suitable for each child's age, dietary needs and medical requirements.

6.6 Food Hygiene Policy

We maintain high standards of food hygiene to protect children's health and prevent foodborne illness.

All food purchased, stored, prepared or served at Wonder Barn Nursery is handled safely and hygienically in accordance with current Food Standards Agency guidance.

Procedures

Food Safety Management

Staff involved in food preparation or handling receive appropriate food hygiene training.

We follow HACCP principles and relevant Food Standards Agency guidance, including Safer Food, Better Business.

Storage and Preparation

We use reputable food suppliers.

Food is checked for use-by dates, stored at the correct temperature, protected from contamination, kept safely away from chemicals and discarded when unsafe or outside its use-by date.

Food preparation areas are cleaned before and after use.

Crockery, utensils and equipment are clean, stored hygienically, checked for damage and suitable for children's use.

Provided Lunches

Lunches are purchased ready-made from The Nursery Catering Company.

Frozen meals are stored according to supplier instructions. Freezer temperatures are checked and recorded daily.

Meals are cooked according to supplier instructions and temperatures are checked and recorded before serving.

Packed Lunches

Where a child brings a packed lunch, parents/carers receive information about suitable foods and safe storage.

Packed lunches must be stored safely and kept appropriately cool where necessary.

Parents/carers should use an insulated lunch bag and ice pack where appropriate.

Food must be suitable for the child's dietary, allergy and developmental needs and prepared to reduce choking risk.

Kitchen Safety and Supervision

Cleaning products and chemicals are securely stored and inaccessible to children.

Children do not have unsupervised access to the kitchen.

When children participate in cooking or food activities, staff ensure children are closely supervised, hands are washed before handling food, hot surfaces and sharp equipment are managed safely, equipment is age-appropriate, and electrical equipment is used only with appropriate adult supervision.

Reporting of Food Poisoning

We notify Ofsted as soon as reasonably practicable and within 14 days where two or more children cared for on the premises are affected by food poisoning.

We also contact the relevant Environmental Health team where required and cooperate with any investigation.

Further Guidance

- Safer Food, Better Business – Food Standards Agency
- Food Safety – Help for Early Years Providers – GOV.UK
- EYFS nutrition guidance.

6.7 Allergy Management, Weaning and Choking Prevention Policy

We protect children from avoidable risks associated with allergies, intolerances, weaning and choking.

Staff must understand each child's individual dietary and developmental needs and follow the child's agreed arrangements consistently.

Procedures

Before a child starts, we obtain information about dietary requirements, food allergies and intolerances, parental preferences, special health or medical needs, and current weaning stage and familiar food textures.

This information is shared with all staff involved in food preparation, handling and supervision.

At each mealtime and snack time, the named member of staff checks that food is suitable for the individual child.

We maintain ongoing discussions with parents/carers and, where appropriate, health professionals.

Where a child has a known allergy or intolerance, an appropriate allergy action plan is maintained and shared with relevant staff.

Choking Prevention

Food must be prepared in a way that reduces choking risk and is appropriate to each child's developmental stage.

Staff must follow current food-safety guidance; prepare food appropriately, including cutting foods such as grapes safely; avoid unnecessary choking risks; ensure babies and young children are seated safely; minimise distractions; ensure children remain seated while eating; keep children within sight and hearing; and, where possible, sit facing children while they eat.

Choking response protocol (for PFA-trained staff):

1. 1. Encourage effective coughing where appropriate.
2. 2. If the child cannot breathe, cough or speak effectively, call for help and 999.
3. 3. Give appropriate back blows and, where required, abdominal thrusts for children over 1 year, in accordance with current paediatric first aid training.
4. 4. For a baby under 1 year, use the infant choking procedure taught in paediatric first aid training.
5. 5. If the child becomes unconscious, follow the paediatric CPR procedure.
6. 6. Do not put fingers into the child's mouth unless an object can clearly be seen and safely removed.

After any choking incident requiring intervention, record what happened, inform the parent/carer and review the incident for recurring risks.

Legal Framework

- EYFS Statutory Framework for Group and School-Based Providers – September 2026
- Food safety legislation
- Relevant NHS guidance
- Relevant allergy and anaphylaxis guidance.

Further Guidance

- Safer Food, Better Business – Food Standards Agency
- Healthy Eating in the Early Years – NHS Start for Life
- NHS Weaning – Best Start in Life
- NHS Food Allergy and Anaphylaxis guidance
- Food Safety – Help for Early Years Providers.

6.8 Sun Policy

Sun Exposure and UV Rays

We provide daily outdoor opportunities wherever conditions are safe and appropriate.

Staff consider UV levels, temperature, length of outdoor play, shade, children's individual needs, clothing, sun protection and hydration.

Outdoor Time

Outdoor play is adapted according to weather and risk assessment.

We use shade, suitable clothing, hydration and sensible timing to reduce risk. Children are not exposed unnecessarily to prolonged periods of direct sunlight.

Sunscreen Application

Parents/carers are asked to provide suitable sunscreen where required and give appropriate permission for staff to apply it.

Staff follow the setting's agreed procedures for safe application and consider individual needs.

Protective Clothing

Children are encouraged to wear sun hats and lightweight, loose-fitting clothing that provides suitable protection from direct sunlight.

Shaded Areas

Suitable shaded areas are available and children are encouraged to use them during periods of strong sunlight.

Hydration

Fresh drinking water is readily available.

Staff encourage children to drink regularly, particularly during warm weather and physical activity.

Communication with Parents/Guardians

Parents/carers receive information about our approach to sun safety and are asked to provide suitable clothing and sunscreen where required.

Staff communicate concerns about a child's wellbeing, hydration or exposure to heat/sun with parents/carers.

6.9 Safe sleeping

Sleep and Rest

Sleep and rest support children's health and wellbeing.

Children are never forced to sleep.

Staff work with parents/carers to understand children's individual sleep routines and needs while ensuring all sleep arrangements meet EYFS safer-sleep requirements.

Babies under one year

Babies aged 12 months and under must only be placed to sleep in a cot.

Babies must be placed on their back; have their own separate sleep space; sleep on a firm, flat, waterproof mattress; have only appropriate lightweight bedding or a suitable, well-fitted baby sleep bag; have their head uncovered; and have no pillows, toys, bumpers, wedges, straps or additional bedding in the cot.

Babies must not become too hot or cold. The recommended room temperature for babies is 16–20°C.

Babies under six months must have an adult in the same room for every sleep.

All sleeping children must be frequently checked and remain within sight and hearing of staff.

Children aged 1–2 years:

Children in this age group will be provided with a safe, comfortable and developmentally appropriate sleep space, using a suitable cot, coracle, cot bed or sleep mat as appropriate to their age and individual needs. Staff will maintain a calm sleep routine, ensure the sleep area is free from hazards and unsuitable items, and consider the child's temperature, clothing and bedding to prevent overheating. Children will be appropriately supervised and regularly checked while sleeping, with staff remaining able to see and hear children. Individual sleep needs and routines will be discussed with parents/carers and reviewed as the child develops.

Children over 2yrs old

Children over 2 who need to sleep or rest may use suitable sleep mats/beds with appropriate bedding.

Staff ensure children are comfortable and appropriately dressed, potential choking hazards are removed where necessary, the sleep area is calm, children are supervised appropriately, and sleeping children remain within sight and/or hearing of staff.

Young children

Young children who require sleep or rest are provided with a suitable, safe sleep space.

Staff follow each child's agreed sleep routine where appropriate, ensure children are comfortable and appropriately dressed, remove potential hazards before sleep, maintain appropriate supervision, and ensure children remain within sight and/or hearing of staff.

If a child falls asleep outside their designated sleep area, staff assess whether they need to be moved to a safer, more appropriate sleeping space.

Further guidance

- EYFS Statutory Framework – September 2026
- NHS safer sleep advice
- The Lullaby Trust – Safer Sleep for Babies